Penalty	Agency	Date of Notice	Amount	Issue	Resolution
PP2016ENC-1 - LOC with Penalty	Department for Medicaid Services	1/21/2016	\$500.00	MCO November Threshold Errors	Penalty Paid
PP2016TPL-1 - CAP with Penalty	Department for Medicaid Services	1/21/2016	\$1,000	TPL Resource File; should maintain the most current coverage information for members.	Penalty Paid
PP2016SY-1 - LOC with Penalty	Department for Medicaid Services	2/3/2016	\$500	Accepting claims without proper X12 syntax.	Penalty Paid
Encounters - January, 2017	Department for Medicaid Services	2/17/2017	\$14,709.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - February, 2017	Department for Medicaid Services	3/15/2017	\$12,802.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - March, 2017	Department for Medicaid Services	4/17/2017	\$17,508.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - April, 2017	Department for Medicaid Services	5/18/2017	\$35,037.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - May, 2017	Department for Medicaid Services	6/23/2017	\$18,548.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - June, 2017	Department for Medicaid Services	7/21/2017	\$14,760.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - July, 2017	Department for Medicaid Services	8/16/2017	\$86,788.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - August, 2017	Department for Medicaid Services	9/18/2017	\$69,080.00	0.00 Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	
Encounters - September, 2017	Department for Medicaid Services	10/20/2017	\$221,233.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - October, 2017	Department for Medicaid Services	11/17/2017	\$547,704.97	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - November, 2017	Department for Medicaid Services	12/18/2017	\$212,760.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	scinded, remaing amo

Penalty	Agency	Date of Notice	Amount	Issue	Resolution
Encounters - December, 2017	Department for Medicaid Services	1/18/2018	\$572,549.77	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
PP2018MD-1 - Penalty	Department for Medicaid Services	2/8/2018	\$13,000.00	DMS requested DBHDID data by 1/4/2018. DMS received data 26 days late on 1/30/2018.	Penalty Paid
Encounters - January, 2018	Department for Medicaid Services	2/16/2018	\$578,106.74	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - February, 2018	Department for Medicaid Services	3/16/2018	\$580,563.18	Consequences for Failure to Submit Encounters in Accordance with the Contract— Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
PP2018PEI-1-FTC - Penalty - First Offense	Department for Medicaid Services	3/27/2018	\$5,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-2-FTC Penalty - Second Offense	Department for Medicaid Services	3/27/2018	\$10,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-3-FTC - Penalty - Third Offense	Department for Medicaid Services	4/5/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-4-FTC Penalty - Fourth Offense	Department for Medicaid Services	4/5/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018EM-1	Department for Medicaid Services	4/10/2018	\$1,725,000.00	Failed to provide medicall necessary items & services that are required under law and the contract.	Penalty Rescinded Due to DMS Dispute
PP2018PEI-5-FTC Penalty - Fifth Offense	Department for Medicaid Services	4/17/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-6-FTC Penalty - Sixth Offense	Department for Medicaid Services	4/17/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-7-FTC Penalty - Seventh Offense	Department for Medicaid Services	4/17/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-8-FTC Penalty - Eighth Offense	Department for Medicaid Services	4/17/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-9-FTC Penalty - Ninth Offense	Department for Medicaid Services	4/17/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
Encounter's - March, 2018	Department for Medicaid Services	4/20/2018	\$465,143.00	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
PP2018PEI-10-FTC Penalty - Tenth Offense	Department for Medicaid Services	5/2/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-11-FTC Penalty - Eleventh Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-12-FTC Penalty - Twelfth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-13-FTC Penalty - Thirteenth Offense	Department for Medicaid Services	5/3/2018		Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-14-FTC Penalty - Fourteenth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training

Penalty	Agency	Date of Notice	Amount	Issue	Resolution
PP2018PEI-15-FTC Penalty - Fifteenth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-16-FTC Penalty - Sixteenth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-17-FTC Penalty - Seventeenth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
PP2018PEI-18-FTC Penalty - Eighteenth Offense	Department for Medicaid Services	5/3/2018	\$25,000.00	Submission of an incorrect/incomplete application to DMS' provider Enrollment Staff.	Penalty Rescinded Due to DMS Training
Encounter - April, 2018	Department for Medicaid Services	5/18/2018	\$563,148.82	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - May, 2018	Department for Medicaid Services	6/15/2018	\$602,500.66	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - June, 2018	Department for Medicaid Services	7/25/2018	\$9,220.00	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - July, 2018	Department for Medicaid Services	8/18/2018	\$552,728.17	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - August, 2018	Department for Medicaid Services	9/14/2018	\$537,918.13	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - September, 2018	Department for Medicaid Services	10/19/2018	\$742,913.32	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - October, 2018	Department for Medicaid Services	11/16/2018	\$565,169.26	Consequences for Failure to Submit Encounters in Accordance with the Contract— Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - November, 2018	Department for Medicaid Services	12/21/2018	\$814,342.12	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - December, 2018	Department for Medicaid Services	1/18/2019	\$572,285.74	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - January, 2019	Department for Medicaid Services	2/15/2019	\$532,324.37	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - February, 2019	Department for Medicaid Services	3/15/2019	\$511,146.28	Consequences for Failure to Submit Encounters in Accordance with the Contract - Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid

Penalty	Agency	Date of Notice	Amount	Issue	Resolution
PP2019RV-1 - Penalty	Department for Medicaid Services	3/27/2019	\$5,000.00	Passport continued to miss self-initiated deadlines for the project completion date.	Penalty Paid
Encounters - March, 2019	Department for Medicaid Services	4/19/2019	\$518,640.71	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - April, 2019	Department for Medicaid Services	5/20/2019	\$525,729.89	Consequences for Failure to Submit Encounters in Accordance with the Contract— Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - May, 2019	Department for Medicaid Services	6/19/2019	\$570,775.19	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Civil Penalty	Department of Insurance	7/3/2019	\$5,000.00		Penalty Paid
PP2020RV-1 - Penalty - Failure to Respond	Department for Medicaid Services	7/19/2019	\$1,000.00	Passport has failed to complete the corrective action plan submitted for PP2019CFG-1 , resulting in additonal provider complaints and claims processing issues.	Penalty Paid
PP2020FTMD-1 - Penalty	Department for Medicaid Services	7/19/2019		Passport missed the deadline on responding to provider complaint.	Penalty Paid
Encounters - June, 2019	Department for Medicaid Services	7/19/2019	\$524,737.17	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
PP2020RV-1 - Penalty - Repeated Contractual Violation	Department for	7/31/2019		Repeated contractual violation	Penalty Paid
PP2020RV-2 - Penalty - Repeated Contractual Violation	Medicaid Services Department for	7/31/2019			Penalty Paid
PP2020RV-3 - Penalty - Repeated Contractual Violation	Medicaid Services Department for	7/31/2019		Repeated contractual violation Repeated contractual violation	Penalty Paid
Encounters - July, 2019	Medicaid Services Department for Medicaid Services	8/16/2019	\$15,000.00 \$554,580.48	Consequences for Failure to Submit Encounters in Accordance with the Contract— Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - August, 2019	Department for Medicaid Services	9/18/2019	\$631,474.07	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
PP2020RV-4 - Penalty	Department for	10/8/2019	-	Section 40.7 Penalties for Failure to Respond	Penalty Paid
	Medicaid Services Department for Medicaid Services	10/18/2019		to Requests Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - September, 2019 Encounters - October, 2019	Department for Medicaid Services	11/15/2019	\$855,342.03 \$538,256.42	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
Encounters - November, 2019	Department for Medicaid Services	12/18/2019	\$542,078.56	Consequences for Failure to Submit Encounters in Accordance with the Contract Timely submission of Encounter Files; timely submission from adjudication date; accuracy and completeness	Penalty Paid
	Department for		_	Section 40.7 Penalties for Failure to Respond	

Penalty	Agency	Date of Notice	Amount	Issue	Resolution
PP2020RV-6 - Penalty	Department for Medicaid Services	12/18/2019		Section 40.7 Penalties for Failure to Respond to Requests	Penalty Paid

2017-2019 Adverse Actions				
Adverse Action #	Agency	Date of Notice	Issue	Resolution
PP2017PC-1	Department for Medicaid Services (DMS)	1/11/2017	Provider not being enrolled with Passport after one year, claims had not been paid and provider had not received timely assistance with their issues.	The situation was explained which included a timeline of actions taken to demonstrate that Passport was actively addressing the provider's concerns. Recently implemented actions to tighten turnaround time on initial applications were explained. Response was accepted.
PP2017KHA-1	Department for Medicaid Services (DMS)	3/10/2017	Passport forwarded a copy of a DMS Hospital memo dated 4/29/11, to the Kentucky Hospital Association, which was distributed to the hospitals prior to the January 2017 monthly meeting with the MCO. This document is an archived document on the DMS website and was no longer in effect.	Explanation for forwarding the letter was provided. Response was accepted.
PP2017FC-1	Department for Medicaid Services (DMS)	5/19/2017	Decertification of a foster child. Passport did not provide the required three (3) day notice to DMS, DCBS and the provider.	Explanation of our interpretation of the three (3) day notice was provided. Passport took actions requested by DMS. Response was accepted.
PP2017EC-1	Department for Medicaid Services (DMS)	6/5/2017	Failed to provide complete and accurate information to a provider to assist them with their claims.	Passport outlined actions taken to address DMS' concerns. Response was accepted.
PP2018CRE-1	Department for Medicaid Services (DMS)	7/26/2017	Failed to meet the requirements for credentialing and recredentialing providers within the 90 day timeframe.	Passport provided an outline of the issues that contributed to the deficiency and provided a plan for resolutions of each issue. Response was accepted.
PP2018SSH-1	Department for Medicaid Services (DMS)	7/26/2017	Provider was paid 2015 rates instead of the 2016 correct rates and then advised to contact DMS to request copy of 2016 rates for MCO to pay them.	Passport acknowledged an oversight caused by human error contributed to the situation. Corrective actions were taken and the provider's claims were reprocessed. Response was accepted.
PP2018UM-1	Department for Medicaid Services (DMS)	8/10/2017	Passport has not updated existing Medical Policies to include InterQual Guidelines. It is the DMS' expectation that the policies will be sent through the document approval process for review.	Policies were identied to be updated or created to include the InterQual guidelines. Passport's policy for Medical Criterial, Guideline, Policy & Protocol Development, Review and Adoption was updated to reflect DMS submission and approval requirements. Response was accepted.
PP2018SE-1	Department for Medicaid Services (DMS)	8/10/2017	Provider complained that Passport was not paying claims at the correct rate, but acknowledged it was applying Multiple Procedure Payment Reductions (MPPR) incorrectly in response to the complaint.	Passport acknowledged that MPPR was being applied to services for all providers instead of only applied to providers reimbursed on a fee-forservice basis. Passport reprocessed claims and implemented process to reduce the liklihood of a future occurance. Response was accepted.
PP2018CRE-2	Department for Medicaid Services (DMS)	10/11/2017	Failed to credential Liberty Ranch, behavioral health multi-specialty group, within forty-five (45) day required timeframe.	Passport determined that the issue was the same issue addressed in PP2018CRE-1 and referred to DMS to the response to PP2018CRE-1. Response was accepted.
PP2018RP-1	Department for Medicaid Services (DMS)	11/21/2017	Provider complained due to incorrect processing claims were overpaid. Passport acknowledged the processing error and agreed not to recoup overpaid money but then provider received collection notices.	Passport acknowledged due to miscommunication with our TPA subcontractor. The TPA was not notified of the recoupment waiver which led to the collection notices. We notified our TPA of the cessation of the collection notices and provided internal education on providing notice to our TPA. Response was accepted.

Adverse Action #	<u> </u>		Issue	Resolution
PP2018PPH-1			Issue # 1 - Additional training was provided to our Member Services Department to ensure they are following proper process on handling this type of situation. Issue # 2 - Passport noted that both twins were active. One twin had two (2) Passport ID numbers due to having two (2) MAID numbers, one active and one not. The other twin was assigned two (2) Passport ID numbers due to a system error, one active and one not. Protocols are now set to proactively identify duplicate member IDs. Response was accepted.	
PP2018PEI-1	Department for Medicaid Services (DMS)	12/7/2017	Failed to meet contractual requirements when Passport submitted an incomplete/incorrect application to DMS Provider Enrollment Staff	In response to this CAP, Passport completed and implemented several processes for completing and submitting applications to DMS. Response was accepted.
PP2018PEI-2	Department for Medicaid Services (DMS)	12/7/2017	Failed to meet contractual requirements when Passport submitted an incomplete/incorrect application to DMS Provider Enrollment Staff	In response to this CAP, Passport completed and implemented several processes for completing and submitting applications to DMS. Response was accepted.
PP2018PEI-3	Department for Medicaid Services (DMS)	12/7/2017	Failed to meet contractual requirements when Passport submitted an incomplete/incorrect application to DMS Provider Enrollment Staff	In response to this CAP, Passport completed and implemented several processes for completing and submitting applications to DMS. Response was accepted.
PP2018PEI-4	Department for Medicaid Services (DMS)	12/7/207	Failed to meet contractual requirements when Passport submitted an incomplete/incorrect application to DMS Provider Enrollment Staff	In response to this CAP, Passport completed and implemented several processes for completing and submitting applications to DMS. Response was accepted.
PP2018PEI-5	Department for Medicaid Services (DMS)	12/7/2017	Failed to meet contractual requirements when Passport submitted an incomplete/incorrect application to DMS Provider Enrollment Staff	In response to this CAP, Passport completed and implemented several processes for completing and submitting applications to DMS. Response was accepted.
PP2018EM-1	Department for Medicaid Services (DMS)	12/21/2017	Member was unable to transfer out to a more suitable facility due to Passport system not being updated with receiving facility's correct status.	Passport acknowledged when the initial inquiry was received, the suitable facility was unable to accept the member due to a contracting issue as well as a staffing issue at their facility. Passport determined name of the facility was incorrectly entered into Passport's system. The issue was corrected, but the facility was unable to accept the member due to staffing issues. DMS initially imposed a \$1,725,00.00 penalty for the member's 69 days in the higher level of care.
PP2018KS-1	Department for Medicaid Services (DMS)	1/3/2018	The provider submitted a provider complaint due to incorrect rates being loaded in Passport's system. Provider didn't receive proper payment for 2 years.	We responded to the CAP and DMS has not made further inquiry. Passport sent notice of termination to the provider after we were unable to come to an agreement on rates.
PP2018EIR-1	Department for Medicaid Services (DMS)	1/29/2018	Passport sent an External Independent Third Party Review to DMS. Submission included two internal Passport appeals for the same PHI Air Medical Claim.	Passport acknowledged that an appeal letter was sent that didn't contain current language of DMS' requirements. A second appeal letter, containing correct language, was sent. The invalid letter was removed from Passport's letter repository and Passport conducted a review of all letters in our Provider Claims Unit. Response was accepted.

Adverse Action #	Agency	Date of Notice	Issue	Resolution
PP2018ENS-1	Department for Medicaid Services (DMS)	2/14/2018	eNews was not approved by DMS prior to distribution to providers.	Passport requested DMS to reconsider their desire to issue a Corrective Action Plan due to various factors. Passport does not believe the change outlined in the eNews fell under Section 4.4 of the Contract. Passport outlined its internal approval process. However, Passport recognized that DMS considered the communication subject to the their approval requirement. Passport advised it would use the information to guide its determination on future communications.
PP2018XAL-1	Department for Medicaid Services (DMS)	3/13/2018	DMS' response to a Letter of Concern outlines the expectation that when using any part of Medicaid's Fee Schedule in provider contracts, Passport should begin implementation within 30 days of notification. Your MCO should not wait for updates to be made on the CHFS website.	Passport acknowledged a miscommunication between Passport and its vendor caused the delay in updating the fee schedules within 30 days. It was determined that Passport's TPA vendor was only updating the fee schedule rates once the DMS' website reflected current fee schedules. Passport shifted all tasks associated with fee schedule monitoring and updates back to Passport. Passport performed a review of its fee schedules and revised its Policy and Procedure. Response was accepted.
PP2018834-1	Department for Medicaid Services (DMS)	4/6/2018	Passport stated in a response to DMS that "no access issues occurred." However, DMS received member and provider calls that indicated members were experiencing issues with access to care. At least 4 members identified as having eligibility errors due to Passport's late update of the member eligibility file. DMS requested information regarding Passport's server.	Passport advised that its server did not fail, but was restarted to perform maintenance due to too many jobs competing for memory on the server and input/output. As a result, several enhancements were performed to avoid the situation from happening in the future. Response was accepted.
PP2018EQN-1	Department for Medicaid Services (DMS)	5/2/2018	Letters sent to Owensboro Health from Equian dated 10/16/2017 did not include the required appeal information. An additional letter from Lexicode did not include required appeal information.	Passport's understanding was that third party independent review rights were only required in the appeal decision letter once the provider's internal appeals rights were exhausted. Passport reviewed the appeals processes with Equian and Lexicode and worked with them to revise appeals letters to meet DMS guidelines. Response was accepted.
PP2018RHC-1	Department for Medicaid Services (DMS)	5/14/2018	DMS an emailed response from Passport indicating claims from October 2017 would not be paid until sometime in June 2018. DMS believes that the approximate 9 month time frame for resolving the issue is unacceptable.	The issue involved some Rural Health Clinic and Federally Qualified Health Clinics. The providers claims were paid, but had not received Wrap Payments. Once Passport was alerted of the issue, it began actions to resolve the situation. Passport completed the submission of the Encounters to DMS so the providers could receive the payments. Response was accepted.
PP2018CVS-1	Department for Medicaid Services (DMS)	6/12/2018	Passport's subcontractor CVS made a system configuration change that adversely impacted 1,600 members.	Passport determined that CVS had a system error during a sequence of pricing updates. The issue was rectified and system enhancements were put in place. Adversely impacted members were reimbursed by CVS. Response was accepted.
PP2019CFG-1	Department for Medicaid Services (DMS)	8/31/2018	Since implementation of Passport's new claims system, Passport continues to have system configuration errors that are creating claims delays, incorrect payments, incorrect denials, missed documentation during processing, and other provider issues.	Passport noted that there were not significant decreases in claims processing from the old to the new claims system. Passport developed two (2) avenues providers can use to alert Passport of issues. A triage system is also in place to address the various issues. Response was accepted.

Adverse Action #	Agency	Date of Notice	Issue	Resolution
PP2019BEN-1	Department for Medicaid Services (DMS)	9/19/2018	Passport sent e-News regarding a change of claims submission address for Beacon. The change in address led to a provider complaint submission to DMS. E-News was not approved.	The issue related to an eNews informing providers of a change of Beacon's address for claims and appeals. Passport does not believe the change required approval under Section 4.4 of the Contract. Passport will use this matter as guidance on future documents. Passport requested a rescission. DMS denied Passport's request for rescission.
PP2019BIA-1	Department for Medicaid Services (DMS)	9/27/2018	Passport indicated to DMS that Beacon interpreted a provider request for peer-to-peer review as a member expedited appeal, which would have prevented the provider from an External Independent Third Party Review had DMS not been notified. Beacon also communicated to the provider they did not have the right to a written denial of their appeal because the member's appeal had already been heard.	Passport acknowledged Beacon did not provide the expedited review process to the provider and did not send a denial of the "internal appeal" to the provider and member. Beacon has improved the script to be utilized by staff to verify whether the provider is filing an appeal on behalf of the member or the provider. Response was accepted.
PP2019SE-1	Department for Medicaid Services (DMS)	10/26/2018	Optum Recovery identified encounters that are out of compliance with coding guidelines. Passport does not have adequate edits and audits to comply with coding guidelines contained in the CPT.	Passport acknowledged the errors, but disputed the overpayment amounts. Passport took steps to reduce the likelihood of this occurring in the future. Passport completed the claims reprocessing. Response was accepted.
PP2019SME-1	Department for Medicaid Services (DMS)	10/30/2018	DMS has received complaints regarding Member Eligibility information not being accurately maintained in the system for PHP Subcontractor, Avesis. The error has caused interruption of services for Members, and Provider's inability to verify the Member eligibility.	When Passport became aware of the issue it began taking actions for short and long term fixes to resolve the issue. The actions were provided to DMS. Response was accepted.
Corrective Action Plan - Department of Insurance	Depart of Insurance	3/14/2019	Hazardous financial conditions were triggered pursuant to KRS 304.38-070(3)b), 806 KAR 38:100 and 806 KAR3: 150(5-7)(16)	A detailed plan of corrective actions have been provided to the Department of Insurance. The matter is pending.
PP2019FTI-1	Department for Medicaid Services (DMS)	5/20/2019	Passport requested DMS to modify the contract requirements regarding full-time investigators. DMS requested Passport to submit their concerns in writing. This was not received and Passport continues to remain deficient.	Passport acknowledges DMS' requirements. Passport has been unable to find an applicant that meets all of DMS' qualifications. However, it believes the two (2) current investigators possess the valuable experience with healthcare and Medicaid/Medicare. The matter is pending.